PATENT APPLIC ON FEE DETERMINATION RECORD Effective October 1, 2003

Application or Docket Number

10/507421

CLAIMS AS ELLED DARK												±4.5
1	CLAIMS AS FILED - PART I (Column 1) (Column 2)							SMALL	ENTITY		OTH	
	TOTAL CLAIM	Colur	nn 1)	(Co	olumn 21	٦	TYPE			F SMAL	ER THAN L ENTITY	
F	OR	NUMBE	NUMBER FILED			-	RATE			RATE	FEE	
╟-,	OTAL CHARC		TOMBER FILED		NUMBER EXTRA		BASIC F	EE	0	R BASIC FE	E 92	
11-	OTAL CHARG	34"	34 minus 20=		14		XS 9=		OF	XS16=		
	IDEPENDENT	ENDENT CLAIM		/ minus 3 =				X43=		OF	V00	1
		ENDENT CLAIM	PRESENT	IESENT				+145=		70	`	
• 1	f the difference	ce in column 1 i	s less than a	zero, enter	"0" in	column 2				J ^{OF}	-290=	290
CLAIMS AS AMENDED - PART II								TOTAL	· L	OF		1462
		(Column 1)		(Column 2) (Column 3)			1	SMALI	ENTITY	OR		R THAN
AMENDMENT A	}	CLAIMS REMAINING		HIGHE	ST	1	7 [ADDI-	רי ד	SMALL	-,
		AFTER AMENDMENT		PREVIO	USLY	PRESENT EXTRA		RATE	TIONAL	.	RATE	ADDI- TIONAL FEE
2	Total	•	Minus	44		=		`X\$ 9=	1		XS18=	766
AME.	Independent	•	Minus.	***		=	1 F			OR		
	FIRST PRES	ENTATION OF M	IULTIPLE DE	PENDENT	CLAIM		-	X43= ·	ļ	OR	X86=	
								+145=		OR	+290=	
								TOTAL DDIT. FEE		OR	TOTAL ADDIT. FEE	
		(Column 1)	·	(Columi		(Calumn 3)			· ·	-	AUDII. FEE	· · · · · · · · · · · · · · · · · · ·
AMENDMENT B		REMAINING		HIGHE		PRESENT	Г		ADDI-	1 1		ADDI-
		AFTER AMENDMENT		PREVIOU PAID FO		EXTRA		RATE	TIONAL FEE		RATE	TIONAL FEE
	Total	*	Minus	***	<u>-</u>	=		X\$ 9=		OR	X\$18=	
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	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									OR	×00=	
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				•			· AD	TOTAL DIT. FEE		OR ,	TOTAL.	
		(Column 1)		(Column	(2) [.]	(Column 3)						
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N.		AFTER AMENDMENT		PREVIOUS PAID FO	SLY	EXTRA	1	RATE	TIONAL		RATE	TIONAL
AMENUMENI	Total		Minus	**		=	<u> </u>		FEE	-		FEE
ME	Independent	•	Minus	***				X\$ 9=		OR	X\$18=	
	FIRST PRESE	NTATION OF ML	ILTIPLE DEP	ENDENT C	LAIM			X43=		OR	X86=	
							+	145=		OR .	+290=	
If the 'Highest Number Previously Paid For' IN THIS SPACE is law than 70' or to 20.										Ŀ	TOTAL	
		nber Previously Paid ber Previously Paid					ADD	IT. FEE 🗀		OR A	DDIT EEE L	
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